

# NOTICE OF CONTRACT RENEWAL

State Of Missouri
Office Of Administration
Division Of Purchasing
PO Box 809
Jefferson City, MO 65102-0809

http://oa.mo.gov/purchasing

MISC http://oa.mo

RFPS 3(1)349 017000 49

CONTRACT NUMBER	CONTRACT TITLE
CS170042006	Alternatives to Abortion Program Services
AMENDMENT NUMBER	CONTRACT PERIOD
Amendment #001	July 1, 2017 through June 30, 2018
REQUISITION/REQUEST NUMBER	SAM II VENDOR NUMBER/MissouriBUYS SYSTEM ID
NR 886 DFA18000005	43156952500/MB00094162
CONTRACTOR NAME AND ADDRESS	STATE AGENCY'S NAME AND ADDRESS
THE LIGHT HOUSE INC 400 WEST MEYER BOULEVARD P O BOX 22553 KANSAS CITY MO 64113	Department of Social Services Division of Finance & Administration Svs 221 W High Street, Room 310, PO Box 1082 Jefferson City MO 65102-1082

ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:

Contract CS170042006 is hereby amended pursuant to the attached amendment #001, dated 08/10/17.

BUYER	BUYER CONTACT INFORMATION
Julie Kleffner	Email: <u>julie.kleffner@oa.mo.gov</u> Phone: (573) 751-7656 Fax: (573) 526-9816
SIGNATURE OF BUYER	DATE
Julie Klelme	8-22-17

DIRECTOR OF PURCHASING

than body

Karen S. Boeger



AMENDMENT NO.: 001

CONTRACT NO.: CS170042006

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 07/31/17

REQ NO.: NR 886 DFA18000005

BUYER: Julie Kleffner PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

TO: THE LIGHT HOUSE INC

**400 WEST MEYER BOULEVARD** 

P O BOX 22553

KANSAS CITY MO 64113

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

SCAN AND E-MAIL TO:	Julie.Kleffner@oa.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURIER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-
	1517

#### DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

#### SIGNATURE REQUIRED

VENDOR NAME	Missonarian Az SAZLEM ID ISTE AEMDON SKOLITY - MYTH TALONMY ITOM SCREEN)		
The LIGHT House, Inc.	MB00094162		
MAILING ADDRESS			
P. O. Box 22553			
CITY, STATE, ZIP CODE			
Kansas City, MO 64113			
CONTACT PERSON	EMAIL ADDRESS		
Russell L. Martin	RussellM.Lighthouse@MBCH.org		
PHONE NUMBER	PAX NUMBER		
816-361-2233	816-361-8333		
vendor tax filing type with irs (creck one)			
CorporationIndividualState/Local GovernmentPartnershipSole ProprietorX_IRS Tax-Exempt			
AUTHORIZIOSIGNATURE	DATE		
11 hart	August 10, 2017		
PRINTED NAME	THLE		
Russell L. Martin	President		

#### AMENDMENT #001 TO CONTRACT CS1700420006

**CONTRACT TITLE:** 

Alternatives to Abortion Program Services

**CONTRACT PERIOD:** 

July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

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Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

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Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month shall remain the same.

Geographic Region 3	\$ 280,962.00	maximum annual total price
	(\$296,043.16)	

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE:

The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.

# Alternatives to Abortion Program Services Contract No: CS170042006 Amendment No.: 001

**Budget/Price Analysis** 

Direct Administrative Costs	2017 Budget	A2A Eligible Client Expenses
Salaries and Benefits	\$271,500.00	\$195,480.00
Employee Training	\$3,750.00	\$2,700.00
Office Rent/Space	\$6,250.00	\$4,500.00
Office Utilities- Maternity Home	\$11,750.00	\$8,460.00
Facility Insurance	\$4,000.00	\$2,880.00
Office Communications	\$4,000.00	\$2,880.00
Office Repairs and Maintenance	\$21,000.00	\$15,120.00
* Total Direct Administrative Costs	\$322,250.00	\$232,020,00
Option 2: 10% De Minimus (use if no FNICR)		\$23,202.00
Participant Services		\$0.00
Transportation	\$10,500.00	\$7,560.00
Allowances	\$500.00	\$360.00
Client Food	\$10,000.00	\$7,200.00
House and client supplies	\$13,250.00	\$9,540.00
Client Recreation	\$1,500.00	\$1,080.00
Total Participant Services	\$35,750.00	\$25,740:00
Total Direct Admin Cost+10% De Minimus+Total Participant Services	\$358,000.00	\$280,962.00

# Alternatives to Abortion Program Services Contract No: CS170042006 Amendment No.: 001 Budget Narrative

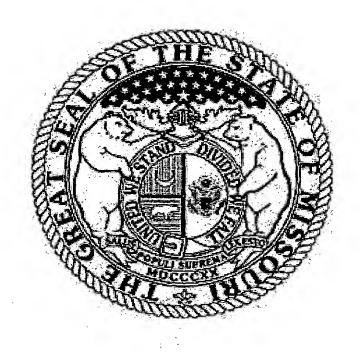
The LIGHT House projects spending \$280,962 in costs covered under the Alternatives to Abortion (A2A) contract.

Based upon historical data we assume that the A2A eligible clients will make up approximately 72% of the total clients served through our maternity home program.

Total direct administrative costs are \$322,250. Assuming A2A eligible clients comprise 72% of our maternity home population, the amount of A2A eligible expenses (including the 10% de minimus) is \$255,222 annually.

Direct participant services (transportation, allowances, supplies, food and recreation) budgeted amounts total \$35,750 per year. Again, assuming A2A eligible clients make up 72% of the maternity home population, the amount of A2A eligible costs in direct participant services total \$25,740.

The total of direct administrative costs and direct participant service costs for A2A eligible clients is \$280,962.



# State of Missouri OFFICE OF ADMINISTRATION

Division of Purchasing

Contract Amendment Documentation

The following documentation consists of additional contract amendment documentation. The additional contract amendment documentation is not a part of the official contract amendment, but provides supporting information for the official contract amendment.

From:

Morrison, Mary Ann

Sent:

Wednesday, August 16, 2017 4:28 PM

To:

Kleffner, Julie

Subject:

FW: Alternatives to Abortion Amendment No. 001

Attachments:

CS170042006-002 (Light House - FY18) APPROVED 8-16-17.pdf

Please see attached.

### Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Benne, Joy

Sent: Wednesday, August 16, 2017 4:21 PM

To: Morrison, Mary Ann

Subject: RE: Alternatives to Abortion Amendment No. 001

Mary Ann,

Please find attached the amendment and "APPROVED" budget for The LIGHT House.

The original documents received contained an error in calculating the 10% de minimus, and the budget breakdown was unclear to what expenditures would be applied to the TANF funding. LIGHT House was asked to submit new documents thus resulting in a new page 2, budget breakdown, and budget narrative.

Thanks.

# Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services

Division of Finance & Administrative Services

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

-----Original Message-----From: Kleffner, Julie

Sent: Friday, August 11, 2017 8:13 AM

To: Morrison, Mary Ann

Cc: Benne, Joy

Subject: RE: Alternatives to Abortion Amendment No. 001

Please review and advise if acceptable to proceed.

Julie Kleffner, CPPB

Division of Purchasing Harry S Truman Bldg, Room 630 Post Office Box 809 Jefferson City MO 65102-0809

Phone: 573-751-7656 Fax: 573-526-9816

----Original Message----

From: Russell Martin [mailto:Russell.Martin@mbch.org]

Sent: Friday, August 11, 2017 8:10 AM

To: Kleffner, Julie < Julie. Kleffner@oa.mo.gov>

Cc: Benne, Joy <Joy.E.Benne@dss.mo.gov>; Julie Ball <Julie.ball@mbch.org>

Subject: Alternatives to Abortion Amendment No. 001

Thanks to assistance from Joy Benne (thank you, Joy), I think we finally have this in the manner in which you need it. The previous submissions should be voided and replaced with this one.

Please let us know if additional information is needed.

Thanks for your patience and for working with us on this.

Russ Martin
The LIGHT House



AMENDMENT NO.: 001

**CONTRACT NO.: CS170042006** 

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 07/31/17

TO: THE LIGHT HOUSE INC

**400 WEST MEYER BOULEVARD** 

P O BOX 22553

KANSAS CITY MO 64113

REQ NO.: NR 886 DFA18000005

BUYER: Julie Kleffner

PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

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Post Office Box 1082
Jefferson City MO 65102-1082

# SIGNATUKE REQUIRED

VENDOR NAME	Misseuribuys system ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)	
The LIGHT House, Inc.	MB00094162	
MAILING ADDRESS		
P. O. Box 22553		
CITY, STATE, ZIP CODE		
Kansas City, MO 64113		
CONTACT PERSON	EMAIL ADDRESS	
Russell L. Martin	RussellM.Lighthouse@MBCH.org	
PHONE NUMBER	FAX NUMBER	
816-361-2233	816-361-8333	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)		
CorporationIndividualState/Local Government PartnershipSole Proprietor _X_IRS Tax-Exempt		
AUTHORIZED SIGNATURE	DATE	
1 hart	August 10, 2017	
PRINTED NAME	TITLE	
Russell L. Martin	President	

#### AMENDMENT #001 TO CONTRACT CS1700420006

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Amendment No.: 001
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From:

Russell Martin < Russell.Martin@mbch.org>

Sent:

Friday, August 11, 2017 8:10 AM

To:

Kleffner, Julie

Cc: Subject: Benne, Joy; Julie Ball Alternatives to Abortion Amendment No. 001

Attachments:

DOC081117-08112017075503.pdf

Thanks to assistance from Joy Benne (thank you, Joy), I think we finally have this in the manner in which you need it. The previous submissions should be voided and replaced with this one.

Please let us know if additional information is needed.

Thanks for your patience and for working with us on this.

Russ Martin
The LIGHT House



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CONTRACT NO.: CS170042006

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 07/31/17

TO:

THE LIGHT HOUSE INC

400 WEST MEYER BOULEVARD

P O BOX 22553

KANSAS CITY MO 64113

REQ NO.: NR 886 DFA18000005

BUYER: Julie Kleffner PHONE NO.: (573) 751-7656

E-MAIL: Julie, Kleffner@oa.mo.gov

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Jefferson City MO 65102-1082

#### SIGNATURE REQUIRED

VENDOR NAME	Missonribuys system ID (see vendor propile - main information screen)		
The L.I.G.H.T. House, Inc.	MB00094162		
MAILING ADDRESS			
P. O. Box 22553			
CTTY, STATE, ZIF CODE			
Kansas City, MO 64113			
CONTACT PERSON	EMAIL ADDRÉSS		
Russell L. Martin	RussellM.Lighthouse@MBCH.org		
PHONE NUMBER	FAX NUMBER		
816-361-2233	816-361-8333		
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)			
CorporationIndividualState/Local GovernmentPartnershipSole ProprietorX_IRS Tax-Exempt			
AUTHORIZED SCHATURE	DATE		
Of hast	August 4, 2017		
PRINTED NAME	TITLE		
Russell L. Martin	President		

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**CONTRACT PERIOD:** 

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Geographic Region 3	\$ 276,729	maximum annual total price
Copperature reserves		
ł	(\$296,043.1	6)

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# Alternatives to Abortion Program Services

Contract No: CS170042006

Amendment No.: 001

#### Budget Narrative and Budget/Price Analysis

Attached is a copy of the 2017 operating budget for The LIGHT House. The highlights as they pertain to this particular contract are:

- 1. Total direct budgeted expenditures for the group home total \$366,000.
- 2. The total costs of operations that are attributable to all programs are \$214,287 (listed under Operations on page 4).
- 3. The group home expenditures are 64% of the total program costs.
- 4. Applying 64% to the Operations portion of the budget allocates \$137,144 to the group home program, resulting in total projected expenditures of \$503,144 for this program.
- 5. Our average projected census for clients eligible for this funding is 2.5 per month, which is 50% of clients served.
- 6. Applying 50% to the total costs of the group home results in a total of \$251,572.
- 7. The application of 10% de minimus (we use this rather than the FNICR) produces \$25.157.
- 8. Adding these together, gives total projected costs covered under this contract of \$276,729.

# The L.I.G.H.T. House, Inc.

# 2017 Budget

	2016 BUDGET	2017 BUDGET	VARIANCE
REVENUE			
Fees for Service:			/
Adoption Fees	75,000	50,000	-33%
Alternatives to Abortion	60,000	85,000	42%
Total Fees for Service	135,000	135,000	0%
Contributions:	22.000	/24.000	420/
Churches	30,000	34,000	13%
Individuals	80,000	85,000	6%
Maternity Home Tax Credit Gifts	210,526	277,777	32%
Grants/Other Tax Credit Programs	40,000	151,000	278%
Corporations	20,000	20,000	0%
Foundations	10,000	7,500	-25%
United Way	10,000	12,500	25%
Baby Bottle Drives	10,000	10,500	5%
Total Contributions	410,526	598,277	46%
Other Revenue:			
Investment Income	0	0	
Special Events	ů	21,000	•
Gain on Sale of Property/Investments	0	0	
Administration Contribution-MBCH	0	31,500	
Miscellaneous Revenue	1,500	0	
Total Other Revenue	1,500	52,500	
/			
Total Revenue	547,026	785,777	44%
/			

# The L.I.G.H.T. House, Inc.

# 2017 Budget

# **EXPENDITURES**

Group Home:			
Salaries and Benefits	225,350	271,500	20%
Allowances/Youth Pay	500	500	0%
Background Checks	250	250	0%
Clients' Clothing	250	250	0%
Education/Training	250	250	0%
Supplies	4,000	12,000	200%
Expense Account	1,000	1,000	0%
Food	10,000	10,000	0%
Medical Care	1,000	1,000	0%
Office Expense	6,000	6,250	4%
Payment to Contract Workers	9,000	/ 0	-100%
Recreation	500	1,500	200%
Staff Development	500	1,750	250%
Conferences/Meetings	2,000	2,000	0%
Other Expenses	2,000	1,500	-25%
Vehicle Lease Expense	6,000	6,000	0%
Gasoline	/3,000	2,500	-17%
Maintenance-Autos	2,500	2,000	-20%
Maintenance-Buildings	15,000	15,000	0%
Maintenance-Equipment	2,500	2,500	0%
Maintenance Contracts	1,500	1,500	0%
Maintenance-Grounds	1,000	1,000	0%
Equipment Replacement/Furnishings	1,000	1,000	0%
Small Equipment Purchases	500	500	0%
Utilities /	10,000	11,750	18%
Interest on Mortgage	3,000	0	-100%
Depreciation /	12,500	12,500	0%
General Insurance	0	0	
Total Group Home	321,100	366,000	14%

# The L.I.G.H.T. House, Inc.

# 2017 Budget

Outreach Program:			
Salaries and Benefits	57,275	113,520	98%
Education and Training	0	3,000	
Supplies	1,270	5,000	294%
Expense Account	250	1,000	300%
Food Expense	1,250	1,750	
Office Expense	1,250	1,000	-20%
Security Services	5,000	5,000	
Payments to Contract Workers	9,000	0	-100%
Staff Development	250	500	100%
Conferences/Meetings	250	250	0%
Other Expenses	1,000	1,000	0%
General Insurance	0	0	
Total Outreach Program	76,795	132,020	72%
Adoption Program:			
Salaries and Benefits	<b>6</b> 3,580	55,720	-12%
Education/Training	250	250	
Supplies	500	500	0%
Expense Account	2,500	4,000	60%
Office Expense	2,000	1,750	-13%
Payments to Contract Workers	10,000	10,000	0%
Staff Development	250	500	100%
Conferences/Meetings	250	250	0%
Other Expenses	500	500	0%
General Insurance	0	0	
Total Adoption Program	79,830	73,470	-8%

# The L.I.G.H.T. House, inc.

# 2017 Budget

Operations:			
Administration Contribution-MBCH	0	31,500	
Professional Expenses	3,000	0	-100%
Board Expenses	2,500	2,500	
Office Expense	7,500	9,500	27%
Legal Expense	500	500	
Postage	1,000	500	-50%
Other Expenses	0	500	
Building Lease	15,900	15,900	/ 0%
Bank and Credit Card Fees	2,500	2,500/	0%
General insurance	25,500	10,000	-61%
Fund Raising Fees	42,105	1,23,855	194%
Payroll Expense	1,250	/ 1,500	20%
Promotion and Printing	2,000	2,500	25%
Special Events	0	<b>7,500</b>	
Taxes, Licenses, Dues	4,000	4,000	0%
Miscellaneous Expense	1,546	1,532	-1%
Total Operations	109,301	214,287	96%
Total Expenses	587,026	785,777	34%
,	/		
Revenue Less Expenses Before Distrib,	-40,000	0	-100%
Distributions:			
From MBCH CFM	40,000		-100%
Total Distributions	40,000	0	-100%
			,
Revenue Less Expenses After Distrib.	0	0	·
/			

From:

Russell Martin < Russell. Martin@mbch.org>

Sent:

Friday, August 04, 2017 1:03 PM

To:

Kleffner, Julie

Cc:

Julie Ball

Subject:

Alternatives to Abortion Amendment No. 001

Attachments:

DOC080417-08042017125556.pdf

Julie, attached please find a signed copy of amendment 001 along with information on the budget and our pricing.

After reviewing our calculations, we determined we were better served to not request the maximum available, so I would ask you to void the amendment I sent you earlier this week and use this one instead. I trust this will not cause you too much difficulty. Part of that is due to the transiency and uncertainty of the clients served in our outreach program who would be eligible, we decided to only consider those residents receiving residential services.

Please let me know if additional information is needed.

From:

Kleffner, Julie

Sent:

Thursday, August 03, 2017 2:46 PM

To:

'Russell Martin'

Subject:

**RE: Alterntives to Abortion** 

Please provide a budget/price analysis and budget narrative.

Julie Kleffner, CPPB
Division of Purchasing
Harry S Truman Bldg, Room 630
Post Office Box 809
Jefferson City MO 65102-0809

Phone: 573-751-7656 Fax: 573-526-9816

From: Russell Martin [mailto:Russell.Martin@mbch.org]

Sent: Thursday, August 03, 2017 7:49 AM
To: Kleffner, Julie < Julie. Kleffner@oa.mo.gov>

Subject: Alterntives to Abortion



AMENDMENT NO.: 001

**CONTRACT NO.: CS170042006** 

TITLE: Alternatives to Abortion Program Services

**ISSUE DATE: 07/31/17** 

TO:

THE LIGHT HOUSE INC

**400 WEST MEYER BOULEVARD** 

P O BOX 22553

KANSAS CITY MO 64113

REQ NO.: NR 886 DFA18000005

BUYER: Julie Kleffner

PHONE NO.: (573) 751-7656 E-MAIL: Julie.Kleitner@oa.mo.gov

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

	or charge company and the contract of the cont
SCAN AND E-MAIL TO:	Julie. Kleffner@oa.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURTER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-
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DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
22. W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

#### SIGNATURE REQUIRED

VENDOR NAME	Missouribuys system ID (see vendor profile - main information screen)
The L.I.G.H.T. House, Inc.	MB00094162
MAILING ADDRESS	
P. O. Box 22553	
CITY, STATE, ZIP COPE	
Kansas City, MO 64113	
CONTACT PERSON	email address
Russell L. Martin	RussellM.Lighthouse@MBCH.org
PHONE NUMBER	FAX NUMBER
816-361-2233	816-361-8333
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)	
CorporationIndividualState/Local GovernmentI	Partnership Sole Proprietor X IRS Tax-Exempt
AUTHORIZIN SIGNATURE	DATE
O hast	August 3, 2017
PRINTED NAME	TITLE
Russell L. Martin	President

### AMENDMENT #001 TO CONTRACT CS1700420006

**CONTRACT TITLE:** 

Alternatives to Abortion Program Services

**CONTRACT PERIOD:** 

July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

Missouri Department of Social Services Division of Finance and Administrative Services 221 W. High Street, Room 310 Post Office Box 1082 Jefferson City MO 65102-1082

Therefore, the all references to the state agency shall be hereby deemed to mean the Missouri Department of Social Services.

Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month and the Residential Care Services, price per client, per month shall remain the same.

0 0 00 040	
Geographic Region 3 \$_296,043	.16 maximum annual total price
(\$296,043	.16)

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE:

The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.

# **MEMORANDUM**

# Office of Administration Division of Purchasing

TO:

Laura Ortmeyer

FROM:

Julie Kleffner

DATE:

July 19, 2017

RE:

Renewal/Amendment to the Alternatives to Abortion Program Services Contracts

The Department of Social Services has requested the Alternatives to Abortion Program Services contracts, CS170042001 through CS170042009, be renewed with a funding increase pursuant to House Bill 11, section 11.120, lines 2 through 6. Pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, funds may increase at the time of renewal if funds are appropriated by the General Assembly.

The contracts are also being amended as follows:

- 1. The administrative responsibilities of the Alternatives to Abortion Program transferred from the Office of Administration to the Department of Social Services.
- 2. As a result of the transfer of administrative responsibilities, Attachment 3 is being revised to reflect the correct state agency.
- 3. Attachment 5 is being revised to reflect the appropriate contract period.

Due to the legislature including a rate increase in the Fiscal Year Budget via House Bill 11 (see attached) and is allowed by paragraph 2.12.3 b. of the contract, I am processing the renewal to the contracts allowing a price increase.

Additionally, 1 CSR 40-1.050 (8) states, "Contracts awarded as the result of a competitive solicitation may be amended when such an amendment is in the best interest of the state and does not significantly alter the original intent or scope of the contract."

Therefore, since the intent and scope of the contract are not altered, I am proceeding to amend the contract as requested.

From:

Benne, Joy

Sent: To: Wednesday, July 19, 2017 3:42 PM Morrison, Mary Ann; Kleffner, Julie

Subject:

RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

Attachments:

RE: A2A FY18 Funding

Please see the attached email from Laclede County Pregnancy Center stating they do not want the increased funding for FY18. Thanks

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services

Division of Finance & Administrative Services

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

From: Morrison, Mary Ann

**Sent:** Wednesday, July 19, 2017 3:39 PM

**To:** Kleffner, Julie **Cc:** Benne, Joy

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In addition to response (2), Laclede County Pregnancy Support Center communicated with DSS they did not want the increased funding for FY18. Let me know if you need the documentation and I'll get it from the Program. Thanks.

# Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Morrison, Mary Ann

Sent: Wednesday, July 19, 2017 3:29 PM

**To:** Kleffner, Julie **Cc:** Benne, Joy

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

Thank you!

In response to (1), funding increase was based on HB 11, section 11.120 lines 2 through 6 minus 3% Governor's reserve on the general revenue portions (line 4) and per DSS upper management, line 6 funding amount was not included (if you need a copy of the HB, just let me know.

In response to (2), funding allocation approximate percentage was taken from section 3.3.2 of the RFP. This percentage was multiplied against the total funding allocation available for FY18 (HB11, section 11.120, lines 4 through 6) which gave the amount of funding for each of the 9 regions. Each region amount was based on # of awards made for each region as outlined in subsection of 3.3.2. Determination on who received the highest percentage is based on ranking from the evaluation process.

Please let me know if there is any additional information needed.

Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Kleffner, Julie

Sent: Wednesday, July 19, 2017 1:05 PM

To: Morrison, Mary Ann

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

I will get something drafted for your review.

Please provide (1) an explanation (e-mail/memo) explaining why funds have increased and (2) an explanation how funding for each contractor was determined for inclusion in the contract file.

Thank you

From: Morrison, Mary Ann

Sent: Wednesday, July 19, 2017 12:50 PM

To: PURCHMAIL < purchmail@oa.mo.gov >; Ortmeyer, Laura < Laura.Ortmeyer@oa.mo.gov >; Kleffner, Julie

<<u>Julie.Kleffner@oa.mo.gov></u>

Subject: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In reference to NR 886 DFA18000005, please renew Alternatives to Abortion contracts/CS170042001-009. The attached backup documentation includes the amendment verbiage, updated attachments and FY18 budget amounts for each contract (column I).

Prior to sending out for signature, please provide a copy of the amendment for program review.

Please contact me with any questions.

Thank you.

Mary Ann Morrison, Procurement Officer II

Missouri Department of Social Services Division of Finance & Administrative Services 615 Howerton Court P.O. Box 1643 Jefferson City, MO 65102-1643 Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

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From:

Abigail Chisom <abigail@psclebanon.org>

Sent:

Tuesday, July 18, 2017 12:23 PM

To:

Benne, Joy

Subject:

RE: A2A FY18 Funding

#### Hi Joy,

Since things have changed with the maternity home funding method we haven't used as much funding. I think we better stay with our original amount at this time so the money can be put to good use elsewhere.

Thank you,

Abigail Chisom Assistant Director Laclede County Pregnancy Support Center 417-532-8555

From: Benne, Joy [mailto:Joy.E.Benne@dss.mo.gov]

Sent: Tuesday, July 18, 2017 11:57 AM

To: 'Abigail Chisom'

Subject: A2A FY18 Funding

#### Abigail,

Question for Laclede County Pregnancy Support Center....For FY2018 the A2A program was given additional funding. Would Laclede County Pregnancy Support Center be able to spend the extra funding in FY2018 if awarded?

We are possibly looking at more than what was stated for maximum annual total price on the contract award page from OA. DSS wants to make sure everyone can use the extra funding without lapsing any.

# Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services
Division of Finance & Administrative Services
Broadway State Office Building
221 W. High St., Room 310
P.O. Box 1082

Jefferson City, MO 65102-1082

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

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	Initial Date  E-Mail/Fax Contractor I State Agency Section 34.0 Review Con A. Renew B. Section C. Perfor D. Renew E. Statew F. SFS A G. Contr	E-Mail Address by Contact E-Mail D40.6, RSMo, L ntract Amenda wal/Extension P on 34.040.6, RSI mance Security wal/Extension w wide Notice Authorized Limitact Assignment	Fax Number ail Address Letter ment Response ricing Mo Deposit/Suret with Cost Saving it \$ nt Only Verific	Manager gnature Requ Fu So Ar Au Follow-Up - Verification y Bond gs Language	Le g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g	Buyer/S Buyer/S Buyer Buyer Buyer Buyer Buyer Buyer Buyer	Asst Director Section Support ADTI S D /Section Suppr/Section Suppr	ort ort ort	OT	8-1 <u>-17</u>
	Initial Date  E-Mail/Fax Contractor I State Agency Section 34.0 Review Contractor I A. Renew B. Section C. Perfor D. Renew E. Statew F. SFS A G. Contractor I Date	E-Mail Address by Contact E-Mail D40.6, RSMo, L Intract Amenda wal/Extension P on 34.040.6, RSI mance Security wal/Extension we wide Notice Authorized Limitract Assignment	Fax Number ail Address etter ment Response ricing Mo Deposit/Suret with Cost Saving it \$ nt Only Verific Affidavit/Docu	Manager gnature Requ Fu So Ar Au Follow-Up - Verification y Bond gs Language	Le g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g	Buyer/S Buyer/S Buyer Buyer Buyer Buyer Buyer Buyer Buyer Buyer Buyer	Asst Director Section Support	ort fort fort ort 2 above.	OT	8-1 <u>-17</u>
	Initial Date  E-Mail/Fax Contractor I State Agency Section 34.0 Review Contractor I A. Renew B. Section C. Perfor D. Renew E. Statew F. SFS A G. Contractor I Con	E-Mail Address by Contact E-Mail D40.6, RSMo, L Intract Amenda Wal/Extension P on 34.040.6, RS omance Security Wal/Extension w wide Notice Authorized Limi ract Assignmen Verify Exhibit/ ssignment and C	Fax Number ail Address etter ment Response ricing Mo Deposit/Suret with Cost Saving it \$ nt Only Verific Affidavit/Docu Consent Form	Manager gnature Requ Fu So Ar Au Follow-Up - Verification y Bond gs Language	Le g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g	Buyer/S Buyer/S Buyer Buyer Buyer Buyer Buyer Buyer Buyer Buyer Buyer	Asst Director Section Support ADTI S D /Section Suppr/Section Suppr	ort fort fort ort 2 above.	OT	8-1 <u>-17</u>
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	Initial Date  E-Mail/Fax Contractor I State Agenc Section 34.0 Review Con A. Renew B. Section C. Perfor D. Renew E. Statew F. SFS A G. Contr 2. As 3. Pu	E-Mail Address by Contact Amenda by Contact Assignment by Contact Assignment contact Assignment and Contact Assignment Address by Contact E-Mail Address by Co	Fax Number ail Address Letter ment Response Pricing Mo / Deposit/Suret with Cost Saving it \$ nt Only Verific Consent Form Insion List	Manager grature Requ fussi Follow-Up	Le g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g i   g	Buyer/S Buyer/S Buyer	Asst Director Section Support	ort ort ort ort ort ort ort ort	OT	8-1 <u>-17</u>
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6.	Initial Date E-Mail/Fax Contractor I State Agenc Section 34.0 Review Con A. Renew B. Sectio C. Perfor D. Renew E. Statew F. SFS A G. Contr 1. E- 2. As 3. Pu 4. Fec 5. Lal	E-Mail Address by Contact Assignment by Contact E-Mail by Cont	Affidavit/Docu Consent Form cnsion List n - SAM.GOV FMDC Contrac	Manager gnature Requ fuss NAGE Follow-Up e-Verification y Bond gs Language cations - Commentation	ired) Sellm (A Any p'Notes:  plete uni  Lists	Buyer/S Buyer/S Buyer	Asst Director Section Support	ort ort ort ort ort ort ort ort	OT	8-1 <u>-17</u>
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